CNC HEADS SPORTS / SALOON CHAMPIONSHIP 2019

DRIVER REGISTRATION FORM

ALL SECTIONS OF THIS FORM MUST BE COMPLETED AND THE FORM SIGNED OR IT WILL NOT BE ACCEPTED

THIS FORM CONSTITUTES THE DRIVER'S REGISTRATION FOR THE CHAMPIONSHIP. A VALID REGISTRATION IS COMPLETE WHEN BOTH THIS FORM AND A VEHICLE SPECIFICATION FORM IS COMPLETED.

NAME : ..... HOME PHONE No. : ..... MOBILE No. : .....

E-Mail :

ADDRESS : .....

..... POST CODE : .....

BARC MEMBER : *YES / NO* BARC(NW) MEMBER : *YES / NO* BARC MEMBERSHIP No : ……

THIS IS THE FIRST YEAR I HAVE RACED : *YES / NO* MOTORSPORT UK LICENCE No : …… GRADE : ……

IF FIRST YEAR WOULD YOU LIKE A BUDDY TO HELP YOU FOR THE FIRST FEW RACES : *YES / NO*

WILL YOU HAVE ISSUES WITH RACE ENTRIES USING REVUP SYSTEM : *YES / NO* ISSUES WITH EMAIL : *YES / NO*

IF POSSIBLE I WOULD LIKE TO BE ALLOCATED NO. ..... FOR THE CHAMPIONSHIP (No guarantee can be made)

VEHICLE 1:

(Please note the details on this form are simply for the Co-ordinators records and for registartion on the on-line entry system, full details should be included on the separate Vehicle Specification form which will be used to determine the eligibility of the vehicle)

MAKE : ..... MODEL : ..... CLASS : ..... TRANSPONDER No. : ……

ENGINE MAKE : ..... CAPACITY : ..... cc WEIGHT : ……Kg POWER : ……..bhp

FORCED INDUCTION : YES / NO ENTRANT (If other than Driver) : .....

VEHICLE 2:

(If you want to register more than one vehicle then please provide details of the second vehicle below. Any more at any point in the season then a separate Vehicle Specification form will need to be completed and forwarded to the Eligibility Scrutineer, Peter Gorrie. In addition the Championship co-ordinator will need to be informed as well to update on-line details)

MAKE : ..... MODEL : ..... CLASS : ..... TRANSPONDER No. : ……

ENGINE MAKE : ..... CAPACITY : ..... cc WEIGHT : ……Kg POWER : ……..bhp

FORCED INDUCTION : YES / NO

I agree that all details above are correct. I agree to complete Vehicle Specification forms for each vehicle I intend to register for the Championship. I have read the Championship regulations and agree to abide by both the Sporting and Technical regulations. I agree that in the event of over-subscription of entries at the 'Grid Accceptance Date' regulation 2.1.7 relating to acceptance will apply. I also agree that the organisers take no responsibility for entries delayed, or lost, in transit for any reason and that it is my responsibility to ensure full payment is made prior to the entry being accepted and available for use in the priority grid alloctaion process at 'Grid Acceptance Date'.

Signature of Registering Driver : ..... Date : .....

WHEN COMPLETED PLEASE RETURN THIS FORM TO THE FOLLOWING ADDRESS OR E-MAIL TO JOHN LECK AT johnleck.racing@hotmail.co.uk :

Championship Co-ordinator : John Leck, 30 Glendyke Road, Liverpool, L18 6JR Tel : 0151 475 9237
Mob : 07889 760872

SEPARATE VEHICLE REGISTRATION FORM(S) **MUST** BE SENT TO PETER GORRIE, ELIGIBILITY SCRUTINEER

Official use :

Number …. Database …. RevUp Entry …. Mail Sent …. Mail Group ….

DATE REC. : ..... No. ALLOCATED : .....